

## Licensee Information

[Close Window](#)

The Massachusetts Department of Public Health has implemented a deferral of expiration on all licenses, certifications, permits, and certificates of registration in good standing issued by the Board of Registration in Nursing, the Board of Registration of Physicians Assistants, the Board of Registration of Refusionists and the Board of Respiratory Care in adherence to [Order of the Commissioner of Public Health COVID-19 Public Health Emergency Order No. 2022-15](#) (issued June 14, 2022) and [Order of the Commissioner of Public Health \(COVID-19 Public Health Emergency Order No. 2022-18](#) (issued September 30, 2022).

### PLEASE NOTE WHEN REVIEWING EXPIRATION DATE:

- If the license expiration date is prior to March 10, 2020, the license is expired.
- Licenses in the professions of Nursing, Physician Assistants, and Respiratory Care with an expiration date between March 10, 2020, and December 31, 2022, are current under the Commissioner's order, but will expire on December 31, 2022. If the expiration date is on or after December 31, 2022, for a license in one of these professions, the license is current and will expire on the stated date.
- MCSRs in these professions with a status of "Current COVID-19" will expire on December 31, 2022.

Please note, Emergency Medical Services certifications are not affected by the above guidance - their marked expiration date and status are accurate. See [Emergency Medical Technicians \(EMTs\) and Paramedics](#) for more information.

### Name

Full Name:	Kristina Rigby Shepherd
------------	-------------------------

### License Information

License Number:	RN2274823	License Type:	Certified Nurse Midwife -- CNM
Profession:	NURSING	Date of Last Renewal:	3/4/2022
Issue Date:	11/1/2013	Expiration Date:	3/8/2024
<a href="#">License Status:</a>	Current	Today's Date:	12/18/2022
Reciprocity State:			

### Address Information

City:	Providence
State:	RI
Zipcode:	02906
Country:	United States

### Education Information

<b>School Name:</b>	Boston College
<b>Degree Certificate:</b>	Bachelor of Science in Nursing
<b>School Name:</b>	Frontier Nursing University
<b>Degree Certificate:</b>	Master of Science

### Prerequisite Information

Licensee:	Shepherd, Kristina Rigby
Relationship:	Self Automatic
License No:	<a href="#">MS1104746B</a>
Licensee:	Shepherd, Kristina Rigby
Relationship:	Self Automatic
License No:	<a href="#">MCS000347B</a>
Licensee:	Shepherd, Kristina Rigby
Relationship:	Self Automatic
License No:	<a href="#">RN2274823</a>

### Disciplinary Information

**Important:** Disciplinary actions taken against a license will NOT display on any other license or associated permit or authorization. You must look up every license, permit, or authorization held by a licensee to see all disciplinary actions.

Case #	Date Closed	Discipline	Discipline Start	Discipline End
Currently there is no disciplinary information regarding this license.				

**Disclaimer:** The information contained in this website ("website content") is made available as a public service by the Massachusetts Department of Public Health (the Department). The Department considers this information to constitute primary source verification. Click [here for full disclaimer](#).